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*Emploi de la suggestion hypnotique pour l'éducation des enfants et des adolescents.* LIÉBEAULT. *Revue de l'Hypnotisme*, Jan. 1889.

The answer to such questions as that of the applicability of hypnotism in pedagogy and moral reform lies in the pooling of observations. To that end Dr. Liébeault contributes a brief statement of 22 cases from his own experience. The subjects ranged in age from 14 months to 19 years. All except one were inferior in intellect, morality or emotional control; 13 were in good physical health, and 8 not so. Of the 13, three were set right, 7 were helped and 3 not helped (7 of these have not yet been long under treatment); of the 8, seven were set right and one not helped. A single case in normal physical and mental condition, a lycée student of sixteen, was able to work more and better while the treatment continued. In all, there were 10 cures, 8 betterments and 4 failures. Hypnotic suggestion proved useful in removing excessive fearfulness in 3, passion in 2, depraved habits in 4, lying in 1; two unruly children were somewhat though not completely restrained. An effort was made some time ago by M. Félix Héments to obtain official permission to put the thing to test on a grand scale among the inmates of the houses of correction. The results of such an experiment would be awaited with the greatest possible interest.

In an earlier number of the same journal (November, 1888), Dr. Aug. Voisin contributes the case of a youth of sixteen who from his boyhood had been uncontrolled, a liar and a thief, and had gone from bad to worse as he grew up. After exhausting his family and several reformatories, he was finally sent to Dr. Voisin. His bad habits gradually yielded to suggestion in successive hypnotizings, and at the end of a month he was apparently reformed. At the end of three months, six weeks after the last hypnotizing, he had had no relapse.

*Des hallucinations négatives suggérées.* Dr. BERNHEIM. *Revue de l'Hypnotisme*, Dec. 1888.

That a negative hallucination was a purely psychical act, a refusal to give audience to a sensation received and registered by lower centers, has long been an accredited doctrine of the Nancy school. Perhaps no more striking evidence in its favor has been furnished than that supplied in this article. The subject was a young lady of eighteen years, affected with sciatica, but otherwise without neurotic taint, easily hypnotizable and showing all the characteristic phenomena. Dr. Bernheim gives her the post-hypnotic suggestion that upon awakening she will not see him; he will be gone. Upon awakening he calls her, stands before her, sticks a pin into her skin, but she refuses to recognize any sensation emanating from him. It may be noted that this does not take place with every subject; some will simply not see the doctor, but will hear him and feel his touches; if such are told that they will neither see, hear nor feel Dr. Bernheim, the result is as that described. Desiring to see how far this condition admitted of abuse from a medico-legal point of view, Dr. Bernheim addressed insulting words to her and threatened violence. Ordinarily very sensitive and reserved, she gave no sign of feeling. She was then hypnotized and told that upon reawakening Dr. Bernheim would be there. This works well and Dr. Bernheim begins to question her. She

stoutly denies his having been present before, and seems to remember nothing of it. By dint of repeated and insistent declaration that he was present she at last remembers; then remembers what he did; and with great hesitation and blushing gives an account of what happened. This experiment shows that this negative hallucination is purely psychic, the impression being received and registered. It shows, too, that this apparent amnesia can in some cases at least be overcome and the latent, ignored impression forced into consciousness. Furthermore, it brings to light a condition of medico-legal interest: for here, in an apparently normal waking condition, a patient may be insensible to a suggested maltreatment.

*Sur l'explication fournie par M. le Dr. Bernheim des hallucinations négatives suggérées.* J. DELBŒUF. *Revue de l'Hypnotisme*, Jan. 1889.

The explanation of Prof. Delbœuf differs from that of Bernheim in the greater prominence that it gives to the co-operation of the subject. He holds, and fortifies his position by citing experiments that the subject behaves exactly as a waking person might that had determined to play the part to the letter. The case given by Bernheim shows nothing that might not have been done by such a person. "The subject lends himself to what is required of him with passivity, but with intelligence."

*Recherches sur l'anesthésie hystérique.* A. BINET. *Comptes Rendus*, CVII, p. 1008, Dec. 17, 1888, and *Revue de l'Hypnotisme*, Jan. 1889.

While skepticism is natural as to the total exclusion of suggestion which Dr. Binet alleges, his experiments are interesting from the likeness of his results to those of experiments on negative hallucination. The negatively hallucinated have been shown to see, hear, smell, etc.; it appears that these hemi-anesthetics really feel. The subjects were twelve hysterics in different Paris hospitals. The following are among the findings reported. Stimulation of an anesthetic area, which the subject was not allowed to see, produced no tactile or muscular sensation, but, instead, a visual image of the area. This could be projected on a screen, and lasted while the stimulation lasted. A prick was seen as a dot; figures drawn with the compass-point appeared in color; gentle constrictions of the wrist or finger called up the image of the part; passive movements were perceived as movements of the image, and could be counted. When two compass-points were applied, one or two dots were seen according to the separation of the points. Measured thus, the discriminative sensibility was found to be about normal. The separation of the points was correctly estimated by some patients if it did not exceed 2-3 cm., but larger distances were underestimated. The shade, light or dark, of the images varied with the subject; the color also changed as sensitive areas were approached. The images behaved in several particulars like after-images. Their details were clearly seen, but sometimes the image did not represent the part; for example, a passively moved finger might be seen as a baton or column. Familiar objects placed in the hand could be recognized as images on the screen. The patients are said not to have suspected the origin of the images, nor to have lost faith in their own anesthesia.